5	3. Generator's Name and Mailing Address Label House 9852 Dupree, So. El		03 4 3 48		State M	anifest Docum	ent Numi	COST PARAMETER	
5	t. Generator's Phone ()		91733		B. State G	8713	195	<u> 55 </u>	
L	Trensporter I Company Name	4. Generator's Phone ()				C. State Transporter's ID COSOS			
	5 Transporter 1 Company Name Omega Recovery Services CA D 04 2 2 45 001 7 Transporter 2 Company Name 8 US EPA ID Number US EPA ID Number				D. Transporter's Phone 213/698-099				
1	7. Transporter 2 Company Name 8. US EPA ID Number					E. State Transporter's D F. Transporter's Phone			
9	9 Designated Facility Name and Site Address 10 US EPA ID Number					acility's ID	- ,	- 1	
	Omega Recovery Services 12504 E. Whittier Blvd.				C A D 0 42 2 45[0 0]				
	Whittier, CA 90602C A D 04 2 2 45 001								
,	11. US DOT Description (Including Proper Sh	ipping Name, Hazard C	Class, and ID Number)	12. Conta	Type	Quantity	Unit Wt/Vol	Waste No	
•	Waste ORM-A NOS	NA 1693	ORM-A					*211	
	(Flexosolvent)		1.	0 05	DM		G	EPA/Other	
6	b .					ž V		State	
			:					EPA/Other	
10	C.		i ,			ţ.		State	
İ			1 4			• • •		EPA/Other	
0	d.				 			State	
						à.		EPA/Other	
F	J. Additional Descriptions for Materials Liste	d Above	<u> </u>		K. Handlin	g Codes for W	astes Li	sted Above	
					01	ħ	<u>.</u>		
					C.	in in in	d.		
F	15 Special Handling Instructions and Additional Information								
						i i			
L	16.		1 1	,					
	GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.								
F	Printed/Typed Name	·-	Signature			1		Month Day	
+,	17. Transporter 1 Acknowledgement of Rece							17-1910	
_	Printed/Typed Name	h / 1 . 1 . 2 . 2	Signature	7, -	W.		,/	Month Day	
 -	18. Transporter 2 Acknowledgement of Rece	ipt of Materials	21 4	assi	FY:232	Caladi		<i>y 20 20 2</i> 1	
F	Printed/Typed Name		Signature			対方	,	Month Day	
1	19. Discrepancy Indication Space								
L	20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Signature								
]	FRANK FORD		Fre	-k -	Fr-	/		1/2/30	